								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO													
		10/723,787											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS 43							R	RATE FEE		1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	BASIC FEE 385.00		OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			니 3minus 20=		* 23		×	X\$ 9=		OR	X\$18=	414	
INDEPENDENT CLAIMS			4 minus 3 =		•		×	X43=		OR	X86=	86	
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT					+145=		OR	+290=		
* 11	the difference	in column 1 is	less than zero, enter "0" in co			column 2	TC	TOTAL			TOTAL	1.270	
CLAIMS AS AMENDED - PART II										3	OTHER		
		(Column 1)	(Column 2) (Column 3			(Column 3)	SN	IALL	ENTITY	OR	SMALL	ENTITY.	
AMENDMENT A	3/12/07	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 35^	Minus	** 4	3	- /	X\$ 9=			OR	X\$18=		
	Independent	·3	Minus	4		3	X43=		OR	X86=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT GLAIM								45=	-		+290=		
1, 20,24,43								TOTAL		OR	TOTAL		
	' '	_ ,						T. FEE	Ļ	OR	ADDIT. FEE		
		(Column 1) CLAIMS		Colun		(Column 3)			4001	1 1	· 	ADDI	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total ·	*	Minus	**		=	XS	9=		'OR	X\$18=		
	Independent	*	Minus	***	01.4114		X	13=		OR	X86=		
	FIRST PRESE	NTATION OF ML	LIPLE DEF	ENDENI	CLAIM		+1	45=		OR	+290=		
		•	•					TOTAL			TOTAL ADDIT. FEE	•	
	(Column 1) (Column 2) (Column 3)							I. PEC I			AUUII. FEEI		
AMENDMENT C	`	CLAIMS		HIGH	ST		_		ADDI-			ADDI-	
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	R/A	NTE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		= .	X\$	9=		OR	X\$18=		
	Independent	t	Minus	AAA		=	X4	3=		OR.	X86=		
٦	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							15=					
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
1	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL ADDIT. FEE		
1	r tne "Highest Nur The "Highest Nurn	mber Previously Pa iber Previously Pak	in For IN THIS I For (Total or	SPACE is Independe	nt) is the	n 3, enter "3." highest number	found in	the app	ropriate box	in col	umn 1.		
		•									•		